

SUBMITTAL TO THE BOARD OF SUPERVISORS
COUNTY OF RIVERSIDE, STATE OF CALIFORNIA



ITEM: 3.21
(ID # 21796)

MEETING DATE:

Tuesday, June 06, 2023

FROM : PUBLIC SOCIAL SERVICES:

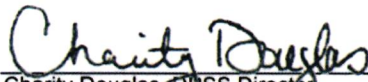
SUBJECT: DEPARTMENT OF PUBLIC SOCIAL SERVICES (DPSS): Approve the First Amended and Restated Professional Services Agreements CS-03979-02 Amendment No. 2 with California Family Life Center and CS-03980-02 Amendment No. 2 with MarSell Consulting & MHS, for SafeCare Services to extend the period of performance for one-year through June 30, 2024 and increase the budgets by a total of \$705,500; All Districts. [Total Aggregate Cost \$705,500; up to \$141,100 in additional compensation; Realignment 88%, Children's Trust Fund 12%]

RECOMMENDED MOTION: That the Board of Supervisors:

1. Approve Amendment No. 2 to the First Amended and Restated Professional Services Agreement CS-03979-02 with California Family Life Center for SafeCare Services to extend the period of performance for one-year through June 30, 2024, increase the contract amount by \$530,000; and authorize the Chair of the Board to sign the Amendment on behalf of the County, and

Continued on Page 2

ACTION:Policy


Charity Douglas, DPSS Director

4/26/2023

MINUTES OF THE BOARD OF SUPERVISORS

On motion of Supervisor Perez, seconded by Supervisor Gutierrez and duly carried, IT WAS ORDERED that the above matter is approved as recommended.

Ayes: Jeffries, Washington, Perez, and Gutierrez
Nays: None
Absent: Spiegel
Date: June 6, 2023
xc: DPSS

Kimberly A. Rector
Clerk of the Board

By: 
Deputy

**SUBMITTAL TO THE BOARD OF SUPERVISORS COUNTY OF RIVERSIDE,
STATE OF CALIFORNIA**

RECOMMENDED MOTION: That the Board of Supervisors:

2. Approve Amendment No. 2 to the First Amended and Restated Professional Services Agreement CS-03980-2 with MarSell Consulting & MHS for SafeCare Services to extend the period of performance for one-year through June 30, 2024, increase the contract amount by \$175,500; and authorize the Chair of the Board to sign the Amendment on behalf of the County; and

3. Authorize the Purchasing Agent, in accordance with Ordinance No. 459, based on the availability of fiscal funding and as approved as to form by County Counsel to: (a) sign amendments that make modifications to the scope of services that stay within the intent of the agreement; and (b) sign amendments to the compensation provisions that do not exceed the sum total of twenty percent (20%) annually.

FINANCIAL DATA	Current Fiscal Year:	Next Fiscal Year:	Total Cost:	Ongoing Cost
COST	\$0	\$705,500	\$705,500	\$0
NET COUNTY COST	\$0	\$0	\$0	\$0
SOURCE OF FUNDS: 88% Realignment, 12% Children's Trust Fund			Budget Adjustment: No	
			For Fiscal Year: 23/24	

C.E.O. RECOMMENDATION: Approve

BACKGROUND:

Summary

SafeCare is an evidenced-based in-home parenting education program that targets parents/caregivers who are at-risk, have been reported for child maltreatment and/or have open dependency cases. Through SafeCare, trained staff work with at-risk families in their home environment to improve parent/caregiver's skills in several domains. The sessions include home safety training, child health care needs and parent-child/parent-infant interactions.

In July 2018, DPSS awarded agreement CS-03979 to California Family Life Center and CS-03980 to MarSell Consulting and MHS for SafeCare services, via the competitive bid process under Request for Quote (RFQ) DPARC-559. The agreements were approved by the Board of Supervisors on July 17, 2018, Agenda Item 3.31. California Family Life Center and MarSell Consulting continue to serve as DPSS contracted providers for SafeCare Services via agreements CS-03979 and CS-03980 respectively, which are set to expire June 30, 2023.

On January 4, 2023, County Purchasing released Request for Proposal (RFP) DPARC-615 for SafeCare Services. This bid closed February 3, 2023 and is currently undergoing the evaluation process. DPSS is seeking to extend the current agreements through June 30, 2024, to ensure

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STATE OF CALIFORNIA**

there is no lapse in services while the bid evaluations and award recommendation is complete. Agreements CS-03979 with California Family Life Center and CS-03980 with MarSell Consulting and MHS will terminate after the procurement process is complete and a new agreement(s) has been executed.

Impact on Residents and Businesses

These amendments will ensure SafeCare services continue to be available to parents/caregivers needing this service.

Additional Fiscal Information

Funding for these amendments have been budgeted through the normal County budget process:

California Family Life Center

FISCAL YEAR PERIOD	ANNUAL PAYMENT
Execution through June 30, 2019	\$ 387,520.20
July 1, 2019 through June 30, 2020	\$ 430,000.20
July 1, 2020 through June 30, 2021	\$ 530,000.20
July 1, 2021 through June 30, 2022	\$ 530,000.20
July 1, 2022 through June 30, 2023	\$ 530,000.20
July 1, 2023 through June 30, 2024	\$ 530,000.00
Total	\$ 2,937,521.00

MarSell Consulting and MHS

FISCAL YEAR PERIOD	ANNUAL PAYMENT
Execution through June 30, 2019	\$ 175,500.00
July 1, 2019 through June 30, 2020	\$ 175,500.00
July 1, 2020 through June 30, 2021	\$ 240,000.00
July 1, 2021 through June 30, 2022	\$ 240,000.00
July 1, 2022 through June 30, 2023	\$ 240,000.00
July 1, 2023 through June 30, 2024	\$ 175,500.00
Total	\$ 1,246,500.00

Contract History and Price Reasonableness

California Family Life Center was awarded their current agreement, CS-03979, and MarSell Consulting and MHS was awarded their current agreement, CS-03980 through a competitive bid process via Request for Quote DPARC-559. These agreements were approved by the Board of Supervisors on July 17, 2018, Agenda Item 3.31. They were deemed the lowest, most responsive and responsible bidders.

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On April 25, 2018, Riverside County Purchasing, on behalf of DPSS, released Request for Quote DPARC-559 for SafeCare Services for FY 2018/2019 through FY 2022/2023. There were five proposals for Zone 1 (Western County), three each for Zones 2 (Mid and Southwest County) and 3 (Desert and Eastern County), and two for Zone 4 (Blythe). California Family Life Center was selected as the winning bid for Zones 2, 3 and 4. California Family Life Center's cost proposal per unit of service was \$88.74 for Zone 2, \$86.81 for Zone 3 and \$150 for Zone 4. The other proposals range from \$105 to \$210 for those three Zones. MarSell Consulting was selected as the winning bid for Zone 1. MarSell Consulting's cost proposal per unit of service was \$65.00. The other proposals range from \$90.42 to \$200 for this Zone.

ATTACHMENTS:

Attachment A: Amendment No. 2 to the First Amended and Restated Agreement CS-03979-02 with California Family Life Center

Attachment B: Amendment No. 2 to the First Amended and Restated Agreement CS-03980-02 with MarSell Consulting and MHS



Meghan Hahn, Deputy Director of Procurement

4/27/2023



Brianna Lontajo, Principal Management Analyst

5/23/2023



Kristine Bell-Valdez, Supervising Deputy County Counsel

5/3/2023

RIVERSIDE COUNTY DEPARTMENT OF PUBLIC SOCIAL SERVICES
AMENDMENT NO. 2 TO THE
FIRST AMENDED AND RESTATED AGREEMENT CS-03979 WITH
CALIFORNIA FAMILY LIFE CENTER

SAFECARE PROGRAM SERVICES

AGREEMENT: CS-03979
PERIOD OF PERFORMANCE: July 17, 2018 through June 30, 2024
EFFECTIVE DATE OF AMENDMENT: July 1, 2023
MAXIMUM REIMBURSABLE AMOUNT: \$ 2,937,521

This Amendment No. 2 to the First Amended and Restated Agreement CS-03979-02 ("Agreement") for SafeCare Services, is made by and between the County of Riverside, a political subdivision of the State of California, on behalf of its Department of Public Social Services (herein referred to as "COUNTY") and California Family Life Center, a California nonprofit corporation (hereinafter referred to as "CONTRACTOR").

RECITALS

WHEREAS, COUNTY and CONTRACTOR previously entered into that certain Agreement CS-03979 for SafeCare Services on July 17, 2018, Agenda Item 3.31; that First Amended and Restated Agreement CS-03979-01, entered into June 30, 2020, to allow for the coordination of training and increase the budget to allow for continuation of services; and that Amendment No. 1 to the First Amended and Restated Agreement CS-03979-02, entered into April 19, 2021; and

WHEREAS, COUNTY and CONTRACTOR now desire to renew and amend the Agreement to extend the period of performance through June 30, 2024; amend the Schedule A to include a maximum annual amount for Fiscal Year 2023/2024; and increase the total maximum reimbursable amount; and

WHEREAS, Section 40 "Modification of Terms" allows for modification by written amendment signed by both parties.

NOW THEREFORE, in consideration of their mutual covenants, COUNTY and CONTRACTOR agree to renew and extend the Agreement according to the terms and in the manner set forth herein:

1. **Recitals.** The recitals set forth above are true and correct and incorporated herein by this reference.
2. **Amend Agreement Number.** On the Recitals Page and every page thereafter, amend all references to the Agreement number CS-03979-02 to read CS-03979-03.
3. This Agreement is hereby renewed and extended for an additional one (1) year term, commencing on July 1, 2023 through June 30, 2024.
4. **Amend Section 4. Period of Performance** to read as follows:

"PERIOD OF PERFORMANCE

This Agreement shall be effective July 17, 2018 and continue through June 30, 2024, unless terminated earlier. CONTRACTOR shall commence performance upon the effective date and shall diligently and continuously perform thereafter."

5. **Delete Schedule A, "Schedule, Terms and Method of Payment," Subsection A.1. "MAXIMUM AMOUNTS - ANNUAL AND AGGREGATE TOTALS"** in its entirety and replace with the following:

"The total annual payments to CONTRACTOR shall not exceed:"

FISCAL YEAR PERIOD	ANNUAL PAYMENT
Execution through June 30, 2019	\$ 387,520.20
July 1, 2019 through June 30, 2020	\$ 430,000.20
July 1, 2020 through June 30, 2021	\$ 530,000.20
July 1, 2021 through June 30, 2022	\$ 530,000.20
July 1, 2022 through June 30, 2023	\$ 530,000.20
July 1, 2023 through June 30, 2024	\$ 530,000.00
Total	\$ 2,937,521.00

6. **Effective Date.** This Amendment 2 shall become effective July 1, 2023.

7. **ELECTRONIC SIGNATURES**

Each party of this Agreement agrees to the use of electronic signatures, such as digital signatures that meet the requirements of the California Uniform Electronic Transactions Act ("CUETA") Cal. Civ. Code §§ 1633.1 to 1633.17), for executing this Agreement. The parties further agree that the electronic signature(s) included herein are intended to authenticate this writing and to have the same force and effect as manual signatures. Electronic signature means an electronic sound, symbol, or process attached to or logically associated with an electronic record and executed or adopted by a person with the intent to sign the electronic record pursuant to the CUETA as amended from time to time. Digital signature means an electronic identifier, created by computer, intended by the party using it to have the same force and effect as the use of a manual signature, and shall be reasonably relied upon by the parties. For purposes of this section, a digital signature is a type of "electronic signature" as defined in subdivision (i) of Section 1633.2 of the Civil Code.

8. **Delete** Attachment IV, "DPSS 2076A, DPSS 2076B & Instructions" and replace with the attached DPSS 2076A, DPSS 2076B & Instructions.

9. **Miscellaneous.** All other terms and conditions of the Agreement not modified herein shall remain unchanged and in full force and effect.

IN WITNESS WHEREOF, the undersigned as authorized representatives of the Parties have executed this Amendment No. 2 to the Agreement.

County of Riverside

Kevin Jeffries

Kevin Jeffries
Board of Supervisors, Chair

Jun 8, 2023

Date

California Family Life Center

Mary Jo Ramirez

Mary Jo Ramirez
Executive Director

Apr 26, 2023

Date

ATTEST:

Kimberly Rector
Clerk of the Board

By: *Breanna Smith*
Deputy



Approved as to Form
Minh C. Tran
County Counsel

By: *Katherine Wilkins*
Katherine Wilkins
Deputy County Counsel

Date: Apr 26, 2023

COUNTY OF RIVERSIDE DEPARTMENT OF PUBLIC SOCIAL SERVICES

CONTRACTOR PAYMENT REQUEST

To: Riverside COUNTY
Department of Public Social Services
Attn: Management Reporting Unit
4060 COUNTY Circle Drive
Riverside, CA 92503

From:
Remit to Name
Address
City, State and Zip Code
Contract Number

Total amount requested _____ for the period of _____ 20 _____

Select Payment Type(s) Below:

[] Advance Payment \$ _____ (if allowed by Contract/MOU) [] Actual Payment \$ _____ (Same amount as 2076B if needed)

[] Unit of Service Payment \$ _____
_____ (# of Units) x _____ (Unit Price) = (\$) _____
_____ (# of Units) x _____ (Unit Price) = (\$) _____
_____ (# of Units) x _____ (Unit Price) = (\$) _____
_____ (# of Units) x _____ (Unit Price) = (\$) _____
_____ (# of Units) x _____ (Unit Price) = (\$) _____

Any questions regarding this request should be directed to and authorized by:

_____ Name _____ Phone Number

FOR DPSS USE ONLY (DO NOT WRITE BELOW THIS LINE)

If amount authorized is different from the amount requested, please explain:

MRU Authorization _____ Date _____

Amount Authorized _____

Invoice Number _____

PO Number _____

DEPARTMENT OF PUBLIC SOCIAL SERVICES FORMS

Mailing Instructions: When completed, these forms will summarize all of your claims for payment. Your Claims Packet will include DPSS 2076A, 2076B (if required), invoices, payroll verification, and copies of canceled checks attached, receipts, bank statements, sign-in sheets, daily logs, mileage logs, and other back-up documentation needed to comply with Contract/MOU.

Mail Claims Packet to address shown on upper left corner of DPSS 2076A. [see method, time, and schedule/condition of payments).

(Please type or print information on all DPSS Forms.)

DPSS 2076A
CONTRACTOR PAYMENT REQUEST

"Remit to Name"

The legal name of your agency.

"Address" "City, State, and Zip Code"

The remit to address used when this contract was established for your agency. All address changes must be submitted for processing prior to use.

"Contract Number"

Can be found on the first page of your contract.

"Amount Requested"

Fill in the total amount and billing period you are requesting payment for.

"Payment Type"

Check the box and enter the dollar amount for the type(s) of payment(s) you are requesting payment for.

"Any questions regarding..."

Fill in the name and phone number of the person to be contacted should any questions arise regarding your request for payment.

EVERYTHING BELOW THE THICK SOLID LINE IS FOR DPSS USE ONLY AND SHOULD BE LEFT BLANK.

RIVERSIDE COUNTY DEPARTMENT OF PUBLIC SOCIAL SERVICES
AMENDMENT NO. 2 TO THE
FIRST AMENDED AND RESTATED AGREEMENT CS-03980 WITH
MARSELL CONSULTING AND MHS
SAFECARE PROGRAM SERVICES

AGREEMENT: CS-03980
PERIOD OF PERFORMANCE: July 17, 2018 through June 30, 2024
EFFECTIVE DATE OF AMENDMENT: July 1, 2023
MAXIMUM REIMBURSABLE AMOUNT: \$ 1,246,500.00

This Amendment No. 2 to the First Amended and Restated Agreement CS-03979-02 ("Agreement") for SafeCare Services, is made by and between the County of Riverside, a political subdivision of the State of California, on behalf of its Department of Public Social Services (herein referred to as "COUNTY") and Marsell Consulting and MHS, a California corporation (hereinafter referred to as "CONTRACTOR").

RECITALS

WHEREAS, COUNTY and CONTRACTOR previously entered into that certain Agreement CS-03980 for SafeCare Services on July 17, 2018, Agenda Item 3.31, effective upon execution through June 30, 2023; that First Amended and Restated Agreement CS-03980-01, entered into October 21, 2020, to allow for the coordination of training and increase the budget to allow for continuation of services; and that Amendment 1 to the First Amended and Restated Agreement CS-03979-02, entered into May 18, 2021; and

WHEREAS, COUNTY and CONTRACTOR now desire to renew and amend the Agreement to extend the period of performance through June 30, 2024; amend the Schedule A to include a maximum annual amount for Fiscal Year 2023/2024; and increase the total maximum reimbursable amount; and

WHEREAS, Section 40 "Modification of Terms" allows for modification by written amendment signed by both parties.

NOW THEREFORE, in consideration of their mutual covenants, COUNTY and CONTRACTOR agree to renew and extend the Agreement according to the terms and in the manner set forth herein:

1. **Recitals.** The recitals set forth above are true and correct and incorporated herein by this reference.
2. **Amend Agreement Number.** On the Recitals Page and every page thereafter, amend all references to the Agreement number CS-03980-02 to read CS-03980-03.
3. This Agreement is hereby renewed and extended for an additional one (1) year term, commencing on July 1, 2023 through June 30, 2024.
4. **Amend Section 4. Period of Performance** to read as follows:

"PERIOD OF PERFORMANCE

This agreement shall be effective July 17, 2018 and continue through June 30, 2024, unless terminated earlier. CONTRACTOR shall commence performance upon the effective date and shall diligently and continuously perform thereafter."

5. **Delete Schedule A, "Schedule, Terms and Method of Payment," Subsection A.1. "MAXIMUM AMOUNTS - ANNUAL AND AGGREGATE TOTALS"** in its entirety and replace with the following:

"The total annual payments to CONTRACTOR shall not exceed:"

FISCAL YEAR PERIOD	ANNUAL PAYMENT
Execution through June 30, 2019	\$ 175,500.00
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July 1, 2020 through June 30, 2021	\$ 240,000.00
July 1, 2021 through June 30, 2022	\$ 240,000.00
July 1, 2022 through June 30, 2023	\$ 240,000.00
July 1, 2023 through June 30, 2024	\$ 175,500.00
Total	\$ 1,246,500.00

6. **Effective Date.** This Amendment 2 shall become effective July 1, 2023.

7. ELECTRONIC SIGNATURES

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8. **Delete** Attachment IV, “DPSS 2076A, DPSS 2076B & Instructions” and replace with the attached DPSS 2076A, DPSS 2076B & Instructions.

9. **Miscellaneous.** All other terms and conditions of the Agreement not modified herein shall remain unchanged and in full force and effect.

IN WITNESS WHEREOF, the undersigned as authorized representatives of the Parties have executed this Amendment No. 2 to the Agreement.

County of Riverside

Kevin Jeffries

Kevin Jeffries
Board of Supervisors, Chair

Jun 8, 2023

Date

MarSell Consulting and MHS

Martinez I. Sellers

Marty Sellers
Chief Executive Officer

May 17, 2023

Date

ATTEST:

Kimberly Rector
Clerk of the Board

By: *Breanna Smith*
Deputy



Approved as to Form
Minh C. Tran
County Counsel

By: *Katherine Wilkins*
Katherine Wilkins
Deputy County Counsel

Date: May 22, 2023

COUNTY OF RIVERSIDE DEPARTMENT OF PUBLIC SOCIAL SERVICES

CONTRACTOR PAYMENT REQUEST

To: Riverside COUNTY
Department of Public Social Services
Attn: Management Reporting Unit
4060 COUNTY Circle Drive
Riverside, CA 92503

From:
Remit to Name
Address
City, State and Zip Code
Contract Number

Total amount requested _____ for the period of _____ 20 _____

Select Payment Type(s) Below:

[] Advance Payment \$ _____ (if allowed by Contract/MOU) [] Actual Payment \$ _____ (Same amount as 2076B if needed)

[] Unit of Service Payment \$ _____
_____ (# of Units) x _____ (Unit Price) = (\$) _____
_____ (# of Units) x _____ (Unit Price) = (\$) _____
_____ (# of Units) x _____ (Unit Price) = (\$) _____
_____ (# of Units) x _____ (Unit Price) = (\$) _____

Any questions regarding this request should be directed to and authorized by:

_____ Name _____ Phone Number

FOR DPSS USE ONLY (DO NOT WRITE BELOW THIS LINE)

If amount authorized is different from the amount requested, please explain:

MRU Authorization _____ Date _____

Amount Authorized _____

Invoice Number _____

PO Number _____

DEPARTMENT OF PUBLIC SOCIAL SERVICES FORMS

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Mail Claims Packet to address shown on upper left corner of DPSS 2076A. [see method, time, and schedule/condition of payments).

(Please type or print information on all DPSS Forms.)

DPSS 2076A
CONTRACTOR PAYMENT REQUEST

"Remit to Name"

The legal name of your agency.

"Address" "City, State, and Zip Code"

The remit to address used when this contract was established for your agency. All address changes must be submitted for processing prior to use.

"Contract Number"

Can be found on the first page of your contract.

"Amount Requested"

Fill in the total amount and billing period you are requesting payment for.

"Payment Type"

Check the box and enter the dollar amount for the type(s) of payment(s) you are requesting payment for.

"Any questions regarding..."

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